SCHEDULE E)	PAGE 1 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
	G 000404207	
Check If 24-hour report 48-hour report New report Amends report to	filed on 09 / 12 / 2012	
Full Name (Last, First, Middle Initial) of Payee The Pivot Group, Inc.	Date	
	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1720 I Street, NW #550	Amount	
City State Zip Code	10058.18	
Washington DC 20008	Transaction ID : D449638	
	Office Sought: House State: OH	
Direct Mail Outcome Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOSH MANDEL C	Check One: Support Oppose	
Calendar Year-To-Date Per Election	Disbursement For: Primary Keneral	
for Office Sought	O12 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
The Pivot Group, Inc.	M M / D D / Y Y Y Y	
Mailing Address 1720 I Street, NW #550	09 10 2012	
Walling Addices 17201 Street, NW #550	Amount	
City State Zip Code	10057.63	
Washington DC 20008	10057.63 Transaction ID : D449639	
(alegory)	Office Sought: House State: OH	
Direct Mail Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
JOSH MANDEL (Check One: Support Oppose	
	Disbursement For: Primary General	
for Office Sought	Other (specify)	
	, <u> </u>	
(a) SUBTOTAL of Itemized Independent Expenditures	20115.81	
(b) SUBTOTAL of Unitemized Independent Expenditures	·	
(c) TOTAL Independent Expenditures	>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y	
Signature [Electronically Filed] Date	10 17 2012	
Oignaturo -		

SCHEDULE E)	PAGE 2 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report X Amends report filed or	09 12 2012	
Full Name (Last, First, Middle Initial) of Payee		
Mack Crounse Group	Oate 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 2001 N. Beauregard Street	33 10 2012	
Suite 420	mount	
City State Zip Code	16770.39	
Alexandria VA 22311	ansaction ID : D449641	
Purpose of Expenditure Direct Mail Category/ 004 Office S		
Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOSH MANDEL Check	One: Support Oppose	
	ement For: Primary 🔀 General	
for Office Sought 60273.79 2012	Other (specify)	
	Date	
Mack Crounse Group	M M / D D / Y Y Y Y	
Mailing Address 2001 N. Beauregard Street	09 10 2012	
	Amount	
City State Zip Code	40770.00	
Alexandria VA 22311	16778.82 ansaction ID : D449642	
Purpose of Expenditure Category/ Office S		
Direct Mail Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOSH MANDEL Check	One: Support Oppose	
Calendar Year-To-Date Per Election Disburs	sement For: Primary 🔀 General	
for Office Sought 60273.79 2012	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	33549.21	
(a) control of nonzero masperson Expension	7 000 10.121	
(b) SUBTOTAL of Unitemized Independent Expenditures		
	7 7 7	
(c) TOTAL Independent Expenditures		
· · · · · · · · · · · · · · · · · · ·	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert		
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler	/ D D / Y Y Y Y	
Signature [Electronically Filed] Date 10	17 2012	
A		

SCHEDULE E)	PAGE 3 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report		
Full Name (Last, First, Middle Initial) of Payee		
Extras, Inc.	Date	
Mailing Address 151 East Lost Toritos	09	
City State Zip Code	Allount	
Weslaco TX 78596	1499.74 Transaction ID : D449643	
Purpose of Expenditure Canvassers Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ————	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1625 L Street, NW	09 10 2012 Amount	
City State Zip Code	Autount	
Washington DC 20036	259.05 Transaction ID : D449800	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 205467.61	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 17 2012	
Signature	2012	

SCHEDULE E)		PAGE 4 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)		FEC IDENTIFICATION NUMBER ▼
Workers' Voice		C C00484287
Check If 24-hour report X 48-hour report New	report X Amends repo	ort filed on 09 12 2012
Full Name (Last, First, Middle Initial) of Payee		Date
AFSCME Special Account		M M / D D / Y Y Y
Mailing Address 1625 L Street, NW		09 10 2012
City State	Zip Code	Amount
Washington DC	20036	259.05
Purpose of Expenditure	Cotogony	Transaction ID : D449801 Office Sought: House State:
In Kind Staff	Category/ Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expend	liture:	President —
Willard Mitt Romney		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	205467.61	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee		
COMMITTEE ON LETTER CARRIERS POL	ITICAL EDUCATIO	N Date
Mailing Address 100 Indiana Avenue, N.W.		09 10 2012
		Amount
City State Washington DC	Zip Code 20001	1262.83
		Transaction ID : D449806 Office Sought: House State:
Purpose of Expenditure In Kind Staff	Category/ Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expend	liture:	President
Barack Obama		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	205467.61	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		1521.88
(b) SUBTOTAL of Unitemized Independent Expenditures		
()		
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler	ctronically Filed] Date	M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
Signature	Date	

(SCHEDULE E)	PAGE 5 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report 48-hour report New report Amends report filed on 09 / 12 / 2012		
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue N.W.	Date 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 100 Indiana Avenue, N.W.	Amount	
CityStateZip CodeWashingtonDC20001	1262.83 Transaction ID : D449807	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committ Mailing Address 11720 Beltsville Drive #700	ee Date 09 / 10 / 2012	
TTTZO BOILDVIIIO BITYO IITOO	Amount	
City State Zip Code Beltsville MD 20705	272.99 Transaction ID : D449811	
Purpose of Expenditure In Kind Staff Category/ Type O01	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	X President Check One: X Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	1535.82	
(b) SUBTOTAL of Unitemized Independent Expenditures	. •	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 17 2012	

NAME OF COMMITTE (In Full) Workers' Voice Fec IDENTIFICATION NUMBER ▼ C CO0484287	SCHEDULE E)	PAGE 6 OF 6 FOR SE OF FORM 24/48		
C CO0442237 Check if 24-hour report 48-hour report	NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee Date	Workers' Voice	C 000404007		
Check IT 24-hour report X 48-hour report New report X Amends report filed on 09 12 2012 Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee Mailing Address 11720 Beltsville Drive #700 City State Zip Code MD 20706 Purpose of Expenditure In Kind Staff Type 001 Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Calendar Year-To-Date Per Election for Office Sought Senate District: Purpose of Expenditure Calendar Year-To-Date Per Election for Office Sought Senate District: Name of Federal Candidate Supported or Opposed by Expenditure: City State Zip Code Purpose of Expenditure Category/ Type Office Sought Senate District: Name of Federal Candidate Supported or Opposed by Expenditure: City State Zip Code Calendar Year-To-Date Per Election for Office Sought Senate District: Name of Federal Candidate Supported or Opposed by Expenditure: Category/ Type Office Sought Senate District: President Check One: Support Office Sought President Check One: Senate District: President Check One: Senate District: President Check One: Support Office Sought Office Sought Senate District: President Check One: Support Office Sought Office Sought Senate District: President Check One: Support Office Sought Office Sought Senate District: President Check One: Support Office Sought Office Sought Office Sought Senate District: President Check One: Support Office Sought Offic		C C00484287		
Plasterers' Cement Masons' & Shop Hands Political Action Committee Mailing Address 11720 Beltsville Drive #700 City State Zip Code Beltsville MD 20705 Furpose of Expenditure In Kind Staff Type 001 Name of Federal Candidate Supported or Opposed by Expenditure: Calendar Year-To-Date Per Election for Office Sought Type Date Mailing Address Mailing Address Amount City State Zip Code Purpose of Expenditure Calendar Year-To-Date Per Election for Office Sought Type Disbursement For: Primary General Clity State Zip Code Purpose of Expenditure Category Type Disbursement For: Sanate District: District: President Check One: Support Oppose Disbursement For: Primary General Clity State Zip Code Purpose of Expenditure Category Type Disbursement For: Support Opposed by Expenditure: Check One: Support Oppose Oppose Disbursement For: Primary General Clity State Support Oppose Oppo	Check If 24-hour report X 48-hour report New report X Amends report filed on 09 / 12 / 2012			
Mailing Address 11720 Beltsville Drive #700 City State Zip Code Beltsville MiD 20705 Purpose of Expenditure In Kind Staff Type 001 Name of Federal Candidate Supported or Opposed by Expenditure: Calegory Office Sought: House Sciale: District: 00 President Support Office Sought: Senate District: 00 President Office Sought: Senate District: 00 President Office Sought: Senate District: 00 Purpose of Expenditure Sought 205467.61 City State Zip Code Purpose of Expenditure Category Office Sought: House State: District: Primary General Candidate Supported or Opposed by Expenditure: City State Zip Code Purpose of Expenditure Category Type Disbursement For: Primary General District: President Check One: Support Oppose District: President Check One: Support Oppose Oppose District: President Check One: Support Oppose Oppose Disbursement For: Primary General Office Sought: Support Oppose Oppose Office Sought: Support Oppose Oppose Office Sought: Support Oppose Oppose Office Sought Office Sought Office Sought: Siate: District: President Check One: Support Oppose Oppose Office Sought Office Sought Office Sought Office Sought Oppose Oppose Office Sought Office Sought Office Sought Office Sought Oppose Office Sought O		Date		
City State Zip Code Betsville MID 20705 Transaction ID: D439812 Purpose of Expenditure In Kind Staff Purpose of Expenditure: Willard Mitt Romney Calendar Year-To-Date Per Election for Office Sought Purpose of Expenditure City State Zip Code Purpose of Expenditure Category/ Type 001 Office Sought Senate District: 00 President Check One: Support Opposed District: 00 Full Name (Last, First, Middle Initial) of Payee Mailing Address City State Zip Code Purpose of Expenditure Category/ Type Office Sought: House State: City State Zip Code Purpose of Expenditure Category/ Type Office Sought: House State: City State Zip Code Category/ Type Office Sought: President Check One: Support Opposed District: President Check One: Support Opposed Date Category/ Type Office Sought: House State: Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought: President Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought Oppose Oppose Disbursement For: Primary General Disbursement For: Primary General Oppose Office Sought Oppose O				
Beltsville MD 20705 Transaction ID: 0449812 Purpose of Expenditure In kind State Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Purpose of Expenditure City State Zip Code Purpose of Expenditure Name of Federal Candidate Supported or Opposed by Expenditure: City State Zip Code Office Sought: Name of Federal Candidate Supported or Opposed by Expenditure: City State Zip Code Office Sought: Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support Office Sought: Primary Sanate District: President Check One: Support Office Sought: Office Sought: Namount City Sanate District: President Check One: Support Office Sought: Office Sought: Office Sought: Primary General Other (specify) Calendar Year-To-Date Per Election for Office Sought Other (specify) Calendar Year-To-Date Per Election for Office Sought Other (specify) Calendar Year-To-Date Per Election for Office Sought Check One: Support Office Sought: Office	Mailing Address 11720 Beltsville Drive #700	Amount		
Beletwile MD 20705 Purpose of Expenditure Category/ Type O01 Office Sought House District: O0 President Category/ Type O01 Office Sought House Oppose One of Calendar Year-To-Date Per Election Cother (Sought Type O01 Office Sought O	City State Zip Code	270.00		
Purpose of Expenditure In Kind Staff Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Calendar Year-To-Date Per Election Iro Office Sought Full Name (Last, First, Middle Initial) of Payee Mailing Address City State Zip Code District: District: On President Check One: Support Oppose District: Primary General Date Turn Individe Sought Date Category/ Type Office Sought: House State: Primary General Date Office Sought: House State: Oppose District: Primary Category/ Type Office Sought: Name of Federal Candidate Supported or Opposed by Expenditure: Category/ Type District: Primary General Office Sought: Office S	Beltsville MD 20705			
In Kind Staff Name of Federal Candidate Supported or Opposed by Expenditure: Check One:	Purpose of Expenditure			
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Mailing Address Mailing Address City State Zip Code Purpose of Expenditure Category/ Type Office Sought: Check One: Support Other (specify) Amount City State: Senate District: President Check One: Office Sought: Amount Check One: State: Senate District: President Check One: Support Office Sought: Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought Other (specify) Other (specify) Other (specify) Other (specify) Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Disbursement For: Primary General Other (specify) Other (specify) Other (specify)	In Kind Staff	Senate		
Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Date	Name of Enderel Candidate Supported or Opposed by Evpanditure:			
Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Mailing Address City State Zip Code Purpose of Expenditure Category/ Type Office Sought: House State: President Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures. (b) SUBTOTAL of Unitemized Independent Expenditures. Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Elizabeth H Shuler Date Disbursement For: Primary General Oppose Disbursement For: Primary General Other (specify) Type Senate District: President Check One: Support Oppose Disbursement For: Primary General Other (specify) Other (specify) Tother (specify) Disbursement For: Primary General Oppose The Support Oppose Check One: Support Oppose Check One: Support Oppose Disbursement For: Primary General Oppose The Support Oppose Check One: Support Oppose Check One: Support Oppose Disbursement For: Primary General Oppose The Support Oppose Check One: Support Oppose Disbursement For: Primary General Oppose The Support Oppose Check One: Support Oppose Check One: Support Oppose Check One: Support Oppose The Support Oppose Check One: Support Oppose Check One: Support Oppose Disbursement For: Primary Check One: Support Oppose Check One: Support Opp		Check One: Support X Oppose		
Full Name (Last, First, Middle Initial) of Payee Mailing Address	Willard Will Konney	emesic ene.		
Mailing Address Amount City State Zip Code	205467.61	0012		
Mailing Address Amount	Full Name (Last, First, Middle Initial) of Payee	Date		
Mailing Address Amount City State Zip Code				
City State Zip Code Purpose of Expenditure Category/ Type Office Sought: House State: Senate District: President Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures. (b) SUBTOTAL of Unitemized Independent Expenditures. (c) TOTAL Independent Expenditures. Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Elizabeth H Shuler [Electronically Filed] Date Office Sought: House State: Senate District: President District: President Check One: Support Oppose Disbursement For: Primary General Other (specify) Other (specify) 58754.50		M = M / D = D / Y = Y = Y		
City State Zip Code Purpose of Expenditure Category/ Type	Mailing Address			
Purpose of Expenditure Category/ Type		Amount		
Name of Federal Candidate Supported or Opposed by Expenditure: Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Check One: Support Other (specify) Category/ Type Senate President Check One: Support Other (specify) Other (specify) Category/ Type Senate Primary General Other (specify) Category/ Type Senate President Check One: Support Other (specify) Other (specify) Category/ Type Senate President Check One: Support Other (specify) Category/ Type Senate President Check One: Support Other (specify) Category/ Type Senate President Check One: Support Other (specify) Category/ Type Senate President Check One: Support Other (specify) Category/ Type Senate Primary General Other (specify) Category/ Type President Check One: Support Other (specify) Category/ Type President Check One: Support Other (specify) Category/ Type President Check One: Support Other (specify) Other (specify) Category/ Check One: Check One: Check One: Support Other (specify) Other (specify) Category/ Check One: Check	City State Zip Code	7 7 7		
Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures. (b) SUBTOTAL of Unitemized Independent Expenditures. (c) TOTAL Independent Expenditures. Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Elizabeth H Shuler [Electronically Filed] Date M M M	Purpose of Expenditure Category/	Office Sought: House State:		
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures		Senate District:		
Check One: Support Oppose Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary General Other (specify)	Name of Federal Candidate Supported or Opposed by Expenditure:	President		
(a) SUBTOTAL of Itemized Independent Expenditures	Tham of Foundation of Supporting of Supportation of Supportati	Check One: Support Oppose		
(a) SUBTOTAL of Itemized Independent Expenditures	Calendar Year-To-Date Per Election	Disbursement For: Primary General		
(c) TOTAL Independent Expenditures	for Office Sought	Other (specify)		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Elizabeth H Shuler [Electronically Filed] Date Date	(a) SUBTOTAL of Itemized Independent Expenditures	272.99		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. **Ms. Elizabeth H Shuler** [Electronically Filed] Date Math	(b) SUBTOTAL of Unitemized Independent Expenditures	•		
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Elizabeth H Shuler [Electronically Filed] Date M M M D D D Y D D D D D D D D D D D D D D	(c) TOTAL Independent Expenditures	58754.50		
[Electronically Filed] Date 10 17 2012	with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political			
	[FI - 4	10 17 2012		